

POSITION	ID NO.	DATE
CLASSIFIER	57	10-1497
EXAMINER	71531	
TYPIST		
VERIFIER		12-19-47
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	15
2	30
1 1	=
2 2	
3 3	
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SYMBOLS

✓	Rejected
=	Allowed
-	(Through number) Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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